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ONTARIO
OFFICIAL
REGULATIONS
HOSPITALS

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OFFICIAL REGULATIONS

FOR THE
Government of Public and Private
Hospitals, Refuges, Orphanages
and Infants' Homes

IN ACCORDANCE WITH CHAPTER 300, SECTION 3.
AND CHAPTER 301, SECTION 3, REVISED
STATUTES OF ONTARIO, 1914

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1920

OFFICIAL
REGULATIONS

FOR THE

Government of India and

Provinces

Annex

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INDEX

	SECTION.
Accident to a patient or inmate, notification of	18
Accounts, notices of, to Municipal Clerk	33
Account Books required	2 (4)
Admission, requirements at time of	14, 29, 68
Appliances for extinguishing fire required	7 (10)
Approval of Inspector required for plans and alterations	6 (1)
Beds and Cots, standard and size required	13, 43
Boards of Management, duties and powers of	1
Boilers, official inspection of required	6 (16)
Books and Records required to be kept	2
Care of Inmates, regulations for	14, 62
Children, special regulations for the care of	49, 67-73
Children not allowed in Refuges for adults	57
Construction, general plan of, suggestions for	6, 50
Conveniences, sanitary, number required and care of	15
Coroner, to be notified of deaths	19
Cottage system of construction, advantages of	50-53
County Houses of Refuge, Additional Regulations for	54-63
Dietary, regulations as to	38, 49, 74
Disinfection	14
Drugs and medicines, regulations regarding	28, 44
Employees, duties of and regulations for	23, 47
Father of infant, responsibilities of	64
Feeble-minded, care of (see also Mentally Defective)	17, 22, 59, 73
Feeding bottle, care of	37, 49 (6)
Field worker, duties of	67, 73
Fire, prevention of and precautions against	6, 7
Flies, not to be tolerated in any Institution	10
Floor space required for each patient and inmate	6 (4)
Food, provision, preparation and care of	6, 38, 49
Friends of inmates to be allowed to visit them	17
Furnishings to be adequate and comfortable	40, 61
Garbage, disposal of	9, 10 (2) (3)
Grants, Provincial, regulations as to and records required for	34
Grounds, regulations as to	21, 51
Heating of buildings, regulations for	16
Hospital:	
Accommodation, standard of	25
As a health centre	27
Definition of	25, 41
Duties of staff and employees in	27
Maternity, additional regulations for	46-53
Organization of	27
Private, additional regulations for	41-45
Public, additional regulations for	25-39

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	SECTION.
Houses of Refuge, additional regulations for	46-53
Illness, serious, of inmate, notification of	18
Infants, admission, care, nursing and feeding of	16, 34 (5), 37, 44, 49, 65, 67, 68-73
Infirmary, required in House of Refuge	54
Inmates, supervision, care and befriending of	59, 62, 64
Inspector of Hospitals and Public Charities to ap- prove by-laws and rules	1
Inspector of Hospitals and Public Charities to ap- prove plans and specifications	5
Inspector of Feeble-minded, notification to be sent to	22
Instruction in industries and out-door occupations	56
Laundry	6 (7)
Maternity Hospital, Wards and Homes, regulations for	36, 37, 46-53, 64-67
Medical Advisory Board, appointment of	28
Medical Officer of Health, supervision of, over Maternity Hospitals	44, 64
Mentally Defective (see also Feeble-minded) care of	17, 22, 59, 73
Monthly returns required	34 (8) (13)
Municipality, responsibility of	22, 33
Nurses, duties of, accommodation required for	24, 26, 47
Orphanages, regulations for	46-53, 68-73
Patients, regulations as to care of	27, 29-33, 43
Penalty for infringement of Act	4, 41, 45
Physician, duties of	48, 60, 68
Private Hospital, additional regulations for	41-45
Refuges and Public Charities, additional regulations for	46-63
Refuges for Women, additional regulations for	64, 65
Registration of Births and of Deaths required	3
Religious services and duties, regulations regarding	63, 71
Sanitation, regulations as to	8-11
Site and location recommended for buildings	6, 51, 53
Social Service Department of Hospital, duties of	39
Supplies, regulations as to	2 (5) (8), 12, 49 (1)
Superintendent, appointment and duties of	3, 12, 18, 19, 26, 46, 47, 69
Toilet and Bath accommodation required	6 (12), 15, 23
Tuberculous patients, admission, care and transfer of	35, 60
Visitors to be admitted to Institutions at reasonable times	17

Regulations for the Government of Public and Private Hospitals, Refuges, Orphanages and Infants' Homes:

1. The Board of Governors, Directors, or Managers or other responsible authority of every Public Hospital, House of Refuge, Refuge, Orphanage, Infants' Home or other Public Charity shall meet not less frequently than once a month and shall appoint one or more of their number from time to time to visit and inspect such institution not less frequently than once a week. A record of such meetings and inspections shall be kept in the institution in a book provided for the purpose, and a copy of all by-laws, rules and regulations adopted by such responsible authority, and of any changes in the same shall be sent to the Inspector within seven days of their adoption in accordance with section 16 of the Act relating to Hospitals and Charitable Institutions.

Board of Managers.

Meetings.

Rules.

BOOKS.

2. The following books are required to be kept at Public Hospitals, Refuges, Houses of Refuge, Orphanages, Infants' Homes and other Public Charities:

Books to be kept.

(1) A daily Record, as prescribed by the Inspector. It is also suggested that a diary be kept of all matters of interest and importance in the institution.

(2) A general Register, in which shall be entered for each inmate the name, date of admission, age, address with municipality, name of relatives or friends or responsible authorities and their addresses and other particulars and also the date of discharge or death.

(3) A Physician's Book, in which shall be entered the visits of physicians, with date and other particulars.

(4) Account Books, containing all accounts, etc., and all financial statements required by law or regulation.

(5) Supplies and Stores Book, containing a record of stores and supplies received, given out and remaining on hand, with dates.

(6) Diet Book, containing a record of meals supplied, menus and other important matters.

(7) Effects Book, in which the clothing and other personal effects received from the inmates for safe keeping should be entered and receipts for the return of the same endorsed thereupon. It is also convenient to have a separate book, kept in

the office safe, to record all money and valuables belonging to patients and inmates as above.

(8) A Stock Book, containing in alphabetical order, an account of all supplies on hand at the end of each month, and clearly indicating the disposition of all goods purchased.

(9) In all General and Maternity Hospitals a chart of approved form must be kept for every patient until convalescence occurs or the case is otherwise terminated, and the same must be properly filed for reference. Every hospital should preserve its clinical records, in order that the histories of cases may be on record.

3. In addition to the legal notification and registration, the Superintendent or Secretary of every Hospital and Public Charity must enter in a proper book of record, within twenty-four hours after the event, any and every birth and death that takes place therein, with all particulars in regard to the same. Births and deaths.

4. Accuracy and exactness in all returns is required. This applies to any omission to enter immediately the name of any patient admitted. Any inattention to these matters is illegal and subject to serious penalties, as well as the loss of any Legislative grant in aid. Section 11 of the Act Returns.

relating to Hospitals and Charitable Institutions reads as follows:—

Penalty.

“Any person who knowingly makes, or is party to the making or procuring to be made, directly or indirectly, any false return, shall incur a penalty of \$1,000, which may be recovered, with costs, by action at the suit of the Crown only.”

NEW BUILDINGS.

Plans to be submitted to the inspector.

5. The Board of Management of any Public or Private Hospital, House of Refuge, Refuge, Orphanage or Infants' Home or other Public Charity shall, before proceeding to erect any new building for the purposes of such institution and before proceeding to erect an additional building or reconstruct or make structural changes or alterations in any building now occupied by such Institution or connected therewith, cause to be prepared and transmitted for the consideration and approval of the Inspector of Hospitals and Public Charities for Ontario, plans and specifications for such new building or buildings or structural changes or alterations. It is also suggested that preliminary plans should be submitted for early consideration by the Inspector in order to give proper time for inspection and approval.

SITE, LOCATION AND GENERAL PLAN OF CONSTRUCTION.

6. The following information and suggestions for the erection and improved construction of Hospitals, Houses of Refuge, Refuges, Orphanages, Infants' Homes and other Public Charities are submitted for the consideration of all interested and especially of the Board of Management of such Institutions.

(1) The plans and specifications of all Hospitals and Public Charities in Ontario and any structural alterations in existing Institutions must be approved of by the Inspector.

Hospitals should be so situated that dust, smoke, noise and traffic or any unpleasant environment may be avoided as far as possible and ample air space secured on all sides of the building. Hospital grounds should also provide an open air space for convalescent patients, with shade trees and flowers if possible. An elevated location is very desirable, and special attention should be given to drainage facilities. A chalky, gravelly or rocky subsoil is the best. There should be no doubt of the water supply; 40 gallons per day per head should be guaranteed.

The pavilion style of construction with the long axis running approxi-

Site of
hospital.

Pavilion.

mately north and south affords great advantages in regard to securing the maximum of air and sunshine and the necessary quietness and desirable classification and separation of patients.

Accommodation for the male and female patients must be kept distinct and separate.

Corridors.

The various wards and departments may be connected by covered ways or corridors. Corridors should in no case exceed eight feet in width. Steps in corridors should be avoided as far as possible, but no incline should exceed one in thirty. Stairs must not be too steep, and a handrail must be provided.

Outlook.

As a rule, buildings should, where possible, be placed with southern exposure to as many rooms as practicable. A good view or outlook should be secured.

Site and plan of other public charities.

All other Public Charities should, as far as possible, have a country site, with garden and farm land, where transportation facilities are good, preference being given to the cottage plan of construction, and offices, waiting rooms, reception rooms and other administrative rooms should be grouped round the main entrance and should have proper toilet accommodation.

(2) Daylight should be secured in Lighting.

all parts of a Hospital or Public Charity by a sufficient number of windows properly placed, and of a simple and pleasing pattern and arrangement. The total window area should bear a proper ratio to the floor area and windows should be easily opened and closed. There should be no dark rooms, corridors or corners in any Hospital or Public Charity, except such as may be required for stores or for X-ray departments. Any Hospital or Public Charity that has to use artificial light in the daytime has been imposed upon by architectural blunders which add greatly to the cost of maintenance. Indirect lighting at night for wards has many advantages.

(3) Good natural ventilation should Ventilation.

be secured by windows on opposite sides of the rooms or wards, such windows to extend to near the ceiling. With a sufficient number of windows so placed the air may be kept fresh and renewed at least twice every hour without harmful draft, especially if the top of the window is an inward-opening transom hinged at the bottom. Doors and fireplaces help to secure good ventilation. Artificial ventilating systems are usually more or less expensive and unsatisfactory, and should never be installed unless with a positive assurance and guarantee that they

will prove workable. At the present date all ventilating systems have proved largely speculative. The open windows with draft shields afford probably the best method of securing pure air in a satisfactory manner. Windows and doors should be properly screened. Every room must be provided with means for direct outside ventilation. Air should be admitted near each radiator.

Open fires.

In places where the aged are cared for an open screened fireplace is a great aid to ventilation, and is desirable. It also tends to the comfort and content of the aged.

**Floor space
in hospitals.**

(4)—(a) The floor space required in wards for each Public Hospital patient is 100 square feet, and the number of cubic feet required is 1,200, provided that the air is completely changed at least twice every hour.

**Private
hospitals.**

(b) The floor space required in Private Hospital rooms or wards for each patient is 120 square feet, and the number of cubic feet required is 1,500, provided that the air is completely changed at least twice every hour.

**Public
charities.**

(c) The floor space required in dormitories for each inmate of a House of Refuge or other Public Charity for adults is 80 square feet, and the num-

ber of cubic feet 900, provided that the air is completely changed at least twice every hour.

(d) The floor space required in dormitories for each inmate of an Orphanage, Infants' Home or other Public Charity for Children is 70 square feet and the number of cubic feet 800, provided that the air is completely changed at least twice every hour.

(e) The general height of each storey should not be less than twelve feet from floor to floor.

(f) Day rooms should provide $9\frac{1}{2}$ square feet of floor space, for each patient or inmate.

(5) The water supply shall be approved of by the Provincial Board of Health, and specimens should be submitted for analysis from time to time. Rain water should be utilized for laundry and other purposes. The drainage system should be approved of by the Provincial Board of Health.

(6) The provision of balconies and sun rooms is one of the chief improvements in the modern construction of institution buildings. They should be wide enough to receive beds and protect them from the weather.

They should have an easterr western or southern exposure and may be protected by roofs, glass, wire screen, netting or awnings as may be required by circumstances, by the age of the inmates or patients or other important considerations. It is advisable and necessary that the floor of the balcony and the floor of the adjoining room, ward or corridor should be on one level and the doors giving entrance to the balcony should be wide enough to allow a bed to be wheeled through. These open air balconies should be fireproof, and if connected by iron stairways from floor to floor make suitable fire escapes. They are of great value in providing open air for the aged, for the infirm and for infants and children as well as for the open-air treatment of patients. The ventilation and lighting of the wards must not be interfered with by the verandah, and where necessary prism glass flooring may be of advantage.

Laundry.

(7) A properly equipped laundry turning out good work systematically and punctually is a great comfort and means much to the smooth running of any institution. It is likewise a great economy. A poor laundry is one of the greatest extravagances a hospital can have.

The laundry should be located so that the noise, odours, and jar of

machinery will not disturb the residents of other parts of the hospital; hence, it should never be immediately under a ward. It should be fairly central to facilitate collection and delivery from all divisions of the hospital. Space permitting, the laundry is best located in a separate building and should at most be limited to two working floors.

The size of the laundry depends upon the number of patients and the number of pieces to be turned out weekly. It is always best to plan for the future, either by allowing sufficient surplus space to permit the installation of additional machinery or by so planning as to permit of future extension, at the same time preserving the proper arrangement.

For a hospital of 100 beds, six set
tubs are required, also two washers,
one mangle, one extractor, one body
ironer, three ironing tables, gas or
electric irons, one 40-gallon soap tank,
one separate sterilizing tub. Where
clothes cannot be dried in the open air
a steam-heated drier is essential.
smaller hospitals should arrange their
equipment in proportion.

Equipment
required.

As a measure of safety as little
wood as possible should be used in
the construction of a laundry. Walls

Fireproof
construction.

of glazed brick are best. Neither plaster nor tile is satisfactory for laundry walls, because steam loosens tiles and softens the plaster. Cement or plain smooth-faced bricks painted a light colour are very good and are easily cleaned.

Machinery
protected.

All machinery should be set away from the walls a sufficient distance to permit of easy cleaning on all sides, and all machinery, belts, etc., must be protected by wire screens.

Every hospital should have in its laundry a large cement receiving tub in which all soiled articles brought to the laundry should be soaked for at least twelve hours before being laundered. This provision not only facilitates washing, but is a great saving to clothing.

All floors, walls, tables, and machines should be kept clean and free from dust, oil, and grease. If this is done quantities of linen will be saved. Tables and mangles should be thoroughly dusted every morning, for dust works mischief if allowed to come in contact with damp clothes. Cover machines and tables at night. Clean the entire laundry regularly and often. Inspect driers frequently for accumulated lint.

Formulæ
for soap.

Every hospital should make its own soap: 25 lbs. of potash, 36 lbs. of soap grease. Mix in caldron, add 15 gals.

of water; simmer for 18 hours, then add water to make 100 gallons.

Careful rules should be laid down for the care and use of blankets. They should be well cared for in the hospital wards and not washed too frequently. Experience teaches that it is economy to have blankets dry-cleaned. Blankets are very seldom properly washed in an ordinary hospital laundry.

The prudent and economic management of the laundry is of the utmost importance in every public institution.

SAVING OF LABOUR.

(8) In the erection of all new buildings and additions, and in any reconstruction of buildings to be used for Hospitals, Houses of Refuge, Refuges, Orphanages, Infants' Homes or other Public Charities, each ward or dormitory should be self-contained, and special attention should be paid, having due regard to economy and fire risk, to all plans, conveniences and contrivances which save labour and assist in the routine and other work of the Institution. Thus, provision should be made for clothes and linen closets, elevators or waiters, house and other telephones, laundry chutes for soiled linen, chutes for ashes, dust and other waste, dustless cleaning apparatus, convenient trans-

Rooms self-contained.

Labour saving.

portation of persons, food and supplies and the collection of waste. Special facilities should be provided for the handling of bread, coal, ice, etc. Elevators should be of fireproof construction and of such size that stretcher or bed may be conveniently carried by the elevator. The elevator shaft should also be fireproof, and the building made as fireproof as practicable.

Woodwork.

(9) Woodwork and ornamentation should be dispensed with as far as possible. Door and window frames and wainscoting should never be seen in a building where economy in domestic service is desired and where all resting places for dust and dirt can be avoided. No cracks, crevices, dark corners or other places where dust collects or from which it is hard to remove dust should be allowed. All junctions where two plane surfaces meet should be rounded, not right-angled.

Floors and walls.

Walls and floors should be plane surfaces, easy to wash, polish or otherwise clean. Floors or floor coverings should have a certain resiliency. where the walls meets ceilings or floors the corners should be rounded to a cove. The floors and walls of operating rooms must be made as non-absorbent as possible.

LOCATION OF UTILITIES.

(10) No living-room, including re-
 factory, dining-room, dormitory, bed-
 room, sitting-room, laundry, kitchen,
 workshop, school-room, recreation-
 room or other living room should have
 its floor below ground-level. Living-
 rooms should have the long axis, if
 possible, running approximately north
 and south so as to have free air space
 and sunlight, both morning and after-
 noon.

No deep
 basements.

(11) Operating-rooms should be
 placed so as to be easily accessible
 from stairways and the elevator and
 should have one large window (north-
 erly exposure preferred) if possible,
 directly opposite to and above the
 operating table. Special attention
 should be given to providing reliable
 artificial light to be used when re-
 quired. Anæsthetizing rooms, recovery
 rooms, sterilizing equipment and
 dressings, also washrooms for surgeons
 and nurses should be adjacent to the
 operating-room, and the entrance of
 the operating-room should be wide
 enough to admit a bed. Means of
 rapid ventilation and heating should
 be provided. Every operating-room
 should be provided with an auxiliary
 form of artificial lighting ready for
 instant use if required at night in the
 event of the light regularly used sud-
 denly failing during an operation.

Operating
 rooms.

Toilet
rooms.

(12) Toilet-rooms should be as accessible to wards as possible, but must not be placed so that the air from them will find its way into other rooms or corridors. They may be placed either in a sanitary tower or at the corners of the building, with a cross-ventilating lobby, and should have, if possible, windows on two sides opening directly into the outside air, the windows being placed so that the cross current of air is between the toilet fixtures and the entrance door. The crescent form of seat is to be preferred.

The floors of toilet-rooms must never be made of wood or other absorbent material.

At least one toilet should be provided for every twelve patients. Separate toilet must always be provided for the staff.

Accessory
rooms.

(13) Bathrooms (tub and shower), diet-kitchens, serving rooms and work-rooms and other accessory rooms should all have outside ventilation and should be placed as conveniently as possible to the wards to which they are respectively accessory. This facilitates good organization and economical management. Sinks and hoppers should never be placed in dark corners, nor where there is not good ventilation.

The placing and equipping of a kitchen is of great importance. Gas and electricity should, if possible, be made available for cooking.

(14) Basements and cellars may be divided and subdivided for storerooms, and other suitable purposes. Food of every kind should be properly classified and stored in or on suitable receptacles, placed in cold rooms, refrigerators or other appropriate places. The kitchen should not be in the basement. Basements.

(15) Suitable mortuary rooms must be provided. Mortuary rooms.

FIRE PREVENTION AND PROTECTION.

(16) The presence of furnaces, boilers, engines, stoves and laundry machinery in the main building of an Institution increases the danger of fire. The laundry should be in a separate building, and no living rooms should be placed over it. The appliances for the drying of clothes should be of the most efficient description. Laundry machinery should have attached to it all approved guards and other safety appliances. If possible, the heating plant should also be placed in a separate building, or if it appears to be necessary to place it in the main building the floor, walls, ceiling and all the immediate surroundings should Furnaces.
Laundry.

be made fireproof. The coal bins should be placed as near the furnaces as safety will allow, and the furnaces should not be too close to the main stairways.

Boilers.

All boilers in Hospitals, County Houses of Refuge, Refuges, Orphanages and Infants' Homes will hereafter be regularly inspected and certified by the proper officials. All requirements must be provided.

Fireproof construction.

(17) Fireproof construction is now regarded as necessary in all new buildings and additions erected for Hospitals and Public Charities unless these are two storeys or less in height.

Fire escapes.

In buildings already occupied outside iron stairway fire escapes or enclosed "fire-tower" stairways, should be so placed in relation to interior stairways that sufficient means of escape from the various parts of each floor may be provided. Fire escapes should be reached through doors or windows cut down to a level with the floor and the stairway should not descend at an angle of more than forty-five degrees and should be of such construction as to permit of any patient or helpless inmate being carried down safely. A sufficient number of exits must be provided and exits from the first floor and basement should be located near the stairway.

Exits.

No timber inserted in any wall shall be placed within nine inches of any smoke-flue. Electrical wiring, gas pipes and all other appliances must be of such a character and in such a position that fire-risk is reduced to a minimum. All electric wiring must be in conduits.

Electric wiring and gas.

7.—(1) In all Public and Private Hospitals, Houses of Refuge, Refuges, Orphanages, Orphans' Homes and other Public Charities, especially where the buildings not being of recent construction are not wholly or even partly fireproof, every care must be taken to prevent fire, and every preparation must be made so that in case of any fire occurring it may be extinguished immediately. The lives and safety of the inmates must have first consideration.

Precautions against fire.

(2) No gasoline, coal oil, paint or other easily inflammable substance is to be stored within any Institution. Fires in Institutions have sometimes been traced to the accidental ignition of such materials as oily rags and oiled paper. The greatest care must be exercised to prevent any such material being left carelessly about.

Inflammable materials.

(3) Matches should not be in the possession of inmates. Safety matches only should be used.

Matches.

Protection
of gas and
stoves.

(4) No gas jet, gas stove or other fixtures should be near or in contact with wood, furnishings or other such material. Zinc or tin should cover and protect walls, tables, woodwork, etc., in proximity to such fixtures. Swinging gas jets are not to be used under any circumstances.

Candles and
lamps.

(5) Candles and lamps must not be used unless no better artificial light can be had. Electric light should now be available and the wiring must be properly placed and insulated in conduits so as to avoid fire risk.

Night watch.

(6) Except in very small Institutions with less than twenty inmates a night watch or night nurse should be employed to guard against fire as well as to supervise the inmates.

Fire-alarms.

(7) All officers, nurses, attendants and other members of the staff should each have an appointed station and duty in the case of fire or fire-drill, and all such persons should be required to be perfectly familiar with the means to be employed to remove helpless patients.

Fire drill.

(8) A special fire signal and fire-drill in large Institutions are recommended.

Chimneys.

(9) All chimneys should be kept clean and swept at least once a year.

(10) In all Institutions approved Appliances. appliances for extinguishing fires must be provided on each floor. These are (a) chemical fire extinguishers; (b) standpipe and hose of sufficient length to reach any part of the floor, or (c) water pails or fire buckets on each floor. Stretchers for carrying out helpless persons are requisite.

(11) Wide interior stairways, preferably of fireproof construction, must be provided and placed so that every inmate may be quickly and safely removed in case of fire. Elevators and elevator shafts must be fireproof, and must be regularly inspected and certified by the proper officials. Fireproof walls and fire-doors should be provided. Stairways and elevators.

(12) Iron stairways or fire escapes of approved construction must be placed on the outside of all Hospitals and Charitable Institutions. Such iron stairways must be joined to iron platforms and balconies on each floor and easily accessible through a door or window. Enclosed "fire-tower" stairways, capable of being isolated from the rest of the building by fire-doors and of fireproof construction may also be used. Fire escapes.

SANITATION.

**Water and
drainage.**

8. Water supply, drainage system and the system of sewage disposal in all Public or Private Hospitals, Houses of Refuge, Refuges, Orphanages and Infants' Homes, where these systems cannot be connected with those of any municipality, must be approved of by the Provincial Board of Health.

Garbage.

9. Garbage, ashes, dust and other forms of dirt and waste should be disposed of with promptness and rapidity. Basement doors should be provided so that ashes may be taken away in the least laborious and most economical manner possible. The collection of garbage and all other waste should be thoroughly supervised so that nothing but waste matter shall find its way into the garbage tins, and this waste should be dry. The garbage tins must also have securely-fitting lids, and no unpleasant odour should be allowed. Everything that can be burned should be disposed of in that way. An incinerator should be a part of the equipment of all large Institutions. Garbage should be removed at least once daily, and in no case can it be allowed to remain longer than three days. Rubbish should never be seen either inside or outside any public Institution and anything whatever that will be liable to attract flies must be strictly prohibited.

10. Flies must not be tolerated in any Hospital, House of Refuge, Refuge, Orphanage, Infants' Home or other Public Charity. When flies are seen in any public institution their presence is always due to culpable negligence. Officers of Institutions are always at liberty to avail themselves of the Government Bulletins on this and similar subjects, where full information may be obtained. Attention is specially drawn to the importance of:

(1) Destroying the one or two winter flies which are often concealed behind pictures, under furniture, or in warm places, such as the kitchen and the furnace-room, and destroying at once the first flies that appear in spring. Winter and spring flies.

(2) Allowing no garbage, manure, or other material where flies can breed to remain about or near the Institution for more than one day in summer or three days at other seasons of the year. Manure.

(3) Wrapping garbage in newspapers or otherwise making it fly-proof and using flyproof covers on garbage tins. Garbage.

(4) Providing wire screens for every window and door, to be placed in position in May and kept on as long Screens.

as may be necessary. Excellent screens have been made by the inmates in some Houses of Refuge.

Sweeping
and dusting.

11. Cleaning, dusting, sweeping and all similar processes in any Hospital, House of Refuge, Refuge, Orphanage, Infants' Home or other Public Charity shall be done with due regard to the laws of health and sanitation. Dry dusting and sweeping cannot be allowed, and in every case some effective mode of preventing the dust from rising and being carried from place to place must be employed. Painted, stained and polished surfaces and those that can be cleaned without hard labour are suitable for the floors, walls and other parts of public institutions, and all carpets and rugs should be easy to remove and clean in the open air.

CARE OF SUPPLIES.

Purchase of
stores and
supplies.

Stock book
must be
kept.

12. The cost accounting of all supplies, stores, food, drugs, alcohol and other things received and used in Hospitals and Public Charities form an important part of the management of an Institution. It should be clearly understood that the Superintendent is responsible for the care and distribution of all and each of the above and for keeping a record of the same. Proper and separate places should be provided and used for the safe keeping of supplies and stores, and as a

rule they should be under lock and key. Poisonous substances should be properly labelled, always under lock and key, and under the charge of a competent person. Supplies should be frequently inspected and articles of a perishable nature should be refrigerated and otherwise cared for so that no waste will occur and that the best possible use may be made of everything. In purchasing supplies regard should be had to season, quality, quantity, state of the markets, personal inspection, local considerations and all other suitable and advantageous matters, and the relative merits of open purchase and tender should not be forgotten. Eggs and butter may often with great advantage be contracted for about June 1st of each year. Supplies received should be carefully weighed on scales and checked over to prevent mistakes.

Care of
stores and
supplies.

Fruit, vegetables, meat, poultry, dairy products and all other farm and garden products, should be, as far as possible, produced and supplied for each Institution from its own garden or farm.

At the end of each month a record of the cost of food supplies per inmate should be made and reported to the Board of Management.

BEDS.

Beds.

13. All beds for use in Hospitals and Public Charities should be of standard length, height and width (6 ft. 3 in. x 3 ft. x 25 in.) and for the use of one person only. They should be of metal, constructed at Ontario Reformatory Industries, and should be furnished with springs attached to metal sides of bed, a mattress, properly protected, and sheets (which should be changed at least every alternate week) and a sufficient quantity of warm bedclothing. Cots for infants and young children may be of smaller size and lower in proportion.

Admission
of inmates.

14. On admission to any Hospital, House of Refuge, Refuge, Orphanage, Infants' Home or other Public Charity an inmate should receive a full bath, and his or her clothing should be fumigated, if necessary.

Baths.

All inmates should have a full bath at least once a week, and there should be at least one bath for every ten or twelve inmates. Shower baths should be provided for men in every institution.

Disinfection,
rules for.

The instructions on disinfection issued by the Provincial Board of Health of Ontario should be followed whenever disinfection is required. The simple method of generating gas by pouring formaldehyde solution over

Formaldehyde
—perman-
ganate of
potash method
recommended.

the crystals of potassium permanganate in an open vessel is strongly recommended. It has the advantage of absolute simplicity in operation, requires no special apparatus, nor the use of fire, and in practice has been found to be unusually efficient.

15. The condition of these sanitary Toilets. conveniences is always important and nothing more clearly indicates the standard of cleanliness and the faithfulness with which proper supervision is carried out. Toilets should be easily accessible and should have outside cross ventilation. At least one toilet should be provided for every ten or twelve persons. In the case of the aged and young children one toilet should be provided for every eight or nine inmates. Inattention to such matters causes suffering and distress. Toilets should always be private and properly screened.

16. In Hospitals or Public Charities Heating. where the aged or young children or infants are cared for the temperature should not be allowed to fall below 68° to 70° . Thermometers should be placed in the different wards and dormitories. Bathing and dressing in the case of the aged or infants should be attended to in a room where the temperature is about 70° . Means of external warmth, such as hot-water

Temperature.

bottles, are essential to the proper care of young infants. At night, if such means of external warmth are provided, the temperature of sleeping rooms and dormitories may be from 60° to 65° in the case of infants and the aged. For robust and healthy persons a temperature of about 60° to 65° in the daytime and 55° to 60° at night is preferable.

FAMILY LIFE.

Visitors.

17. It is important that inmates of Hospitals and Public Charities should be kept in touch as far as it is possible consistently with their own best interests with the outside world. Suitable opportunities should be made for visitors and friends of the inmates to visit the Institution, and the relatives and friends of any inmate should at once be notified of illness, accident or any other important event happening to such inmate. It is especially necessary that children should be kept in touch with the outside world, so that they can take their part in normal family life as soon as possible. Orphanages, Infants' Homes and other Public Charities for children are not to be looked upon as places where children are to remain from year to year. They should, if possible, be sent to Public Schools where they will associate with children other than those belonging to the Institu-

tion. An Institution is merely a place where children are cared for and sheltered for a brief period until they can be replaced in their own homes or a home found for them. It is a grave wrong to a child to deprive him or her of the best preparation for life, which can only be given in a home and to a member of a family circle. The one great exception to this rule is the feeble-minded child. Under no circumstances should such children be sent out to homes where they will only do great harm to themselves and others. Provision should be made for such children by the school authorities of the municipality.

In connection with all these matters it is of very great importance that a correct and full record of the history of each child should be kept.

18. Any grave or alarming symptoms of illness in, or serious accident to any patient, inmate, orphan, child, infant or other resident in any Hospital or Public Charity must be reported at once to the physician in charge and also to the Superintendent, and it shall be the duty of the Superintendent to cause the friends of such inmate or resident to be informed at once of such condition or occurrence.

19. Any death occurring in any Hospital or Public Charity shall be noti-

fied immediately to the Superintendent, and it shall be the duty of the Superintendent at once to inform the friends of the deceased or the responsible authority or person by whom he or she was placed in the Institution, in writing, of such death and to see that every attention and respect is paid to the remains and that the body is properly prepared and clothed before being removed from the institution. The coroner must be notified of any death which there is any reason to suspect was due to unnatural causes. Facilities should be afforded for pathological work. Autopsies should be permitted with the approval of the Superintendent and friends of the deceased.

Religious
services
and recreation.

20. Clergymen of the different churches and other church workers should at all suitable times be welcome visitors to public institutions and every opportunity should be given to the inmates to attend religious services from time to time. All reasonable recreations, such as reading, playing games, music, open air walks and other enjoyments in the grounds and in the open air are to be encouraged. Where at all possible rooms should be provided for play, rest and recreation.

Indoor and
outdoor
recreation.

21. Provision shall be made in existing Institutions as directed by the

Inspector, and in all buildings and Institutions hereafter constructed, for suitable indoor recreation and living rooms in addition to rooms used for dormitories and refectories, and there shall also be adequate grounds and outdoor facilities for change and recreation.

THE FEEBLE-MINDED.

22. There are found in all Hospitals and Houses of Refuge, Orphanages, Infants' Homes and other Public Charities persons who are so feeble-minded that they are not able to care for themselves. These should be reported immediately on admission to the Inspector of Feeble-minded, Parliament Buildings, Toronto, so that steps may be taken to have the municipality to which these feeble-minded children or adults belong make provision for the same in order that they may have proper custodial care and be prevented from propagating their species.

Mentally defective persons must have strict custodial care.

RECREATION AND HOME COMFORTS FOR OFFICERS AND STAFF.

23. In all Institutions it is desirable that in addition to separate bedroom accommodation for domestic employees a sitting-room should be provided. It is also required that two weeks' holiday in the year, and some time off duty during the day, in addition to time for meals, should be given, and

Employees' rooms.

Holidays.

that a record of this should be open to inspection. Bedrooms for men-servants and women-servants should be in different parts of the building and proper and separate toilet and bath accommodation must also be provided.

Rooms for
staff.

24. The accommodation assigned to the Superintendent, officers and staff who make their home in the Institution should be of the most comfortable and convenient character consistent with the work, needs and financial position of the Institute. In Hospitals and other Institutions where nurses and others are on duty at night care should be taken to provide sleeping accommodations for them during the day in a quiet part of the building and never in beds that have been occupied during the previous night. Each officer and nurse should have a separate bed-room.

Night
nurses.

Hours.

The hours of work for members of the staff should be arranged so as to allow sufficient time for meals and an hour or two off duty every day between 7.00 a.m. and 7.00 p.m. Nurses should never be on duty more than twelve hours out of the twenty-four and should have an afternoon off duty each week. The eight-hour system is on trial. A reasonable vacation should be allowed to each member of the staff during the year, a satisfactory substitute being provided by the management, if necessary.

ADDITIONAL REGULATIONS FOR HOSPITALS.

25. The standard of Hospital accommodation for cities of 100,000 population is at least five beds for every 1,000 inhabitants, for a corresponding number in smaller cities, four or five beds, and in towns three or four beds. The modern tendency is to decrease the number of beds in each ward to 12 or even 6. A Hospital, either Public or Private, shall be deemed to be any building or other place where the sick or injured are received and treated or where maternity patients are cared for.

Hospital accommodation.

Definition.

For every Hospital there shall at all times be a chief executive officer, appointed by the Board of Governors or other responsible authority, resident on or near the premises, who shall be responsible for the general conduct and management of all the affairs of the Hospital and shall be known as the Superintendent thereof.

Superintendent.

On appointment of such Superintendent a statement of his or her qualifications shall be notified to the Inspector by the Secretary of the Hospital within seven days of the date of such appointment.

26. Nurses must not be overworked. From five to seven patients, according to circumstances, should be the limit

Nurses.
Number to be employed.

of ordinary ward work for a nurse, except in typhoid fever, when no nurse should have more than two patients.

Health
centre.

Chaplains, visitors, social service officers, paid and voluntary, and other outside officials may be appointed at the will and discretion of the responsible authority or governing body, and every effort shall be made by all Hospitals through their Governors, Staff and Officers, not only to cure and relieve the patients, but to be an educational health centre for the community and to co-operate with other benevolent agencies in effective social service.

MEDICAL ADVISORY BOARD.

Medical
Advisory
Board.

27. Every Hospital receiving aid under *The Hospitals and Charities Institutions Act* shall, in addition to the Board of Governors, or Board of Trustees, have a Medical Advisory Board of not fewer than five members of the Medical staff of the Hospital, selected by themselves, whose duty it shall be to advise the Board of Governors or other governing body of the Hospital on all matters affecting the Hospital which may have any reference to or bearing upon medical or professional matters, and whose advice shall be laid before the Board as often as may be necessary, but not less frequently in any case than once during the year.

DISPENSING OF DRUGS.

28. No nurse or other person in any hospital or charitable institution in Ontario shall be allowed, without the special order of a legally qualified medical practitioner, and then only under exceptional circumstances in an emergency, to prescribe, dispense or compound Morphine, Strychnine, Arsenic, Aconite, Digitalis, Atropine, or other poisonous drugs, but a nurse may, when necessary, be permitted to dispense the remedies named in sub-section A of Section 28 of The Pharmacy Act, Chapter 164, R.S.O. 1914.

Dispensing
of medicines.

ADMITTING DEPARTMENT.

29. Every Public Hospital receiving aid under the Hospital Act should provide and set aside one or more suitable wards or rooms properly equipped and furnished, to be known as an Admitting Department or Observation Ward, and every Superintendent or other Officer, upon receiving a new patient, for admission to such Hospital, should before admitting such new patient to contact with the other inmates or patients, cause him or her to be placed in such Admitting Department until he or she has been seen and examined by the physician on duty and certified by such physician to be free from any communicable disease. Such certificate shall include

Observation
wards.

a statement in the case of children as to the bacteriological report of a culture taken from the throat of such new inmate or patient. Sections 19 and 20 of the Act relating to the necessity of hospitals admitting all patients, not suffering from a communicable and notifiable disease, are applicable only to patients residing in the Province of Ontario.

Supply of vaccine to be kept on hand.

Every such hospital shall also keep at all times an adequate supply of vaccine matter in accordance with the provisions of the Vaccination Act.

PAYMENT FOR PATIENTS.

Non-paying patient.

30. A non-paying patient is a patient who is admitted and cared for free except what is contributed to his or her support by the municipality, but in no case shall a patient be classed as a non-paying patient if a gratuity, bequest or gift is received by the hospital in lieu of any charge that might have been made.

Indigent patient.

31. An indigent patient must be considered as one without means to pay at least one dollar per day for Hospital care and treatment at the time of his admission, having regard not only to the patient's available means, but also to those dependent upon, the patient at home.

The Hospital Act provides (section 23) that for any charges paid by a municipal corporation the patient or his executors or administrators shall be liable as for a debt due to such municipal corporation.

“Resident” as applied to a muni- Resident.
cipality shall mean and include any person who has resided in such municipality continuously for three months or who not having resided therein continuously for such three months was actually employed therein immediately prior to being admitted to any hospital.

32. Any person who within a month Employee.
previous to his admission to a Hospital was employed as outlined in section 7 of section 23 of the Act relating to Hospitals shall be deemed an employee as named in the above-mentioned section.

33. When an indigent patient is Indigent.
admitted to a Hospital without a municipal order for such admission, or when no arrangement has been made by the municipality for the care of its indigents at that hospital, a printed notice in accordance with section 23 of the Act relating to Hospitals should be sent in the following form:

Notice to
municipalities.

Name of Hospital.

Location

19

To the Clerk of the Municipality of

You are hereby notified that
who represents self as being a
resident of the Municipality of
was admitted as a patient to
the above-named Hospital on the
day of 19 .

The ages of the said is
stated to be year.

The said has been a resident
of your Municipality for the past ,
residing at .

The said is an indigent
person under Provincial Regulations
for Hospitals and under the provi-
sions of the statute in that behalf
made and provided the Municipality
of is liable to pay
to this Hospital the charges for the
treatment of the said patient at a rate
of \$1.50 per day and in case of death
to pay burial expenses.

Unless within fourteen days after
the mailing of this notice you notify
the Superintendent of the Hospital by
registered post that such patient is
not a resident of the said Municipality,
with a satisfactory proof thereof
will be deemed to be a resident of it.

Yours truly,

.....
Superintendent.

All accounts for maintenance of a Accounts.
patient in a Hospital or Sanatorium
for Consumptives must be rendered to
the Municipality every three months
and shall then become payable.

PROVINCIAL GRANTS.

34.—(1) An annual Provincial grant, Grants.
as fixed from time to time by the
Lieutenant-Governor in Council, is
made for all patients in a hospital
during the first ten years of its
existence irrespective of what sum is
contributed by the patients them-
selves.

(2) After a hospital has been in Non-paying
existence for ten years the grant is patients.
paid only for patients for whose main-
tenance \$10.50 per week, or less, is
contributed.

(3) In all cases the limit is 120 Time limit.
days, and if patients remain in the
hospital longer than that period, the
Refuge rate of ten cents per day is
allowed.

(4) Patients admitted and dis- One day.
charged on the same day are not
allowed for.

(5) The day of departure must not Last day.
be included in the number of days'
stay of any patient.

(6) Monthly returns, on forms supplied by the Inspector, showing admissions, discharges and deaths during the month, must be forwarded to the Department on the first day of each month. These are tabulated at the Department and form the basis upon which the Provincial grant is allotted to each Hospital according to the number of days' stay of patients.

Discharge.

(7) Patients should not be entered on the monthly "Discharge" sheets until they are actually discharged from the hospital wards; nor should they be entered as discharged at the end of the fiscal year (30th September) if they are still remaining in hospital.

Inspection.

(8) No Provincial grant shall be paid to any Hospital or Charitable Institution unless the Inspector reports that all the requirements, such as accommodation, ventilation, discipline, management, etc., have been found on inspection to be perfectly satisfactory.

Death.

(9) In the case of the death of a patient the name and number of days' stay should not be repeated by an entry on both the "Discharge" sheet and the "Death" sheet. Report the same on the "Death" sheet only.

Numbers.

(10) The checking of the monthly Returns in the Inspectors' Department would be greatly facilitated if

the marginal numbers opposite the names of the patients were made to correspond on the Admission and Discharge sheets. For example, the number given to a patient on the Admission sheet should also be the number given to the same patient on the Discharge sheet, or Death sheet, as the case may be.

(11) The columns in the Monthly Totals. Returns showing the days' stay of patients should be added up at the foot of each page and the totals carried forward to the end.

TUBERCULOUS PATIENTS.

35. All Hospitals receiving public aid shall admit and care for patients having tuberculous disease who apply for admission thereto, provided there is no Sanatorium for Consumptives in the County in which the Hospital is located, and shall treat and isolate them as may be necessary in their best interests and in the best interests of others, and such patients shall not be discharged except when improved or cured so as to be able to care for themselves, unless their immediate and comfortable removal to a Sanatorium has been provided for. In no case, however, shall the number of patients having active tuberculous disease exceed five per cent. of the total capacity for patients at any single Hospital.

MATERNITY WARDS.

Maternity
patients.

36. Maternity patients and their young infants shall in no case be placed in wards along with other patients, but shall be placed in a suitable and separate ward, and a properly equipped room for accouchement shall be provided and also a nursery where the infants may be cared for which shall have, if possible, a southern exposure and a balcony or other outdoor ward attached.

In small hospitals a private ward may be temporarily utilized for a maternity ward, if necessary.

Feeding of
infants.

37. In all Maternity Hospitals, infants must be nursed by their mothers. Members of the nursing and medical staff, especially the head nurse of the Maternity Ward, must in future give personal attention to this matter, and secure it as a first consideration in infant care, as it often means the infant's life. Only on a written order stating the cause which prevents the mother from nursing her child, signed by the Hospital Superintendent and the attending physician in the Maternity Ward or Hospital, is this regulation to be set aside. Infants must be fed and nursed at regular hours according to a schedule. In exceptional cases where an infant cannot be nursed by the mother, the feeding of such infant should be under the

direction of a physician and the rules of surgical cleanliness must be observed in the care of the feeding-bottle and nipple and of the care and preparation of the milk. No person or persons shall take away or cause to be taken away a newborn or young infant from his or her mother, thus interfering with the child's right to life and health.

DIETARY.

38. Great care and attention shall be given to the food provided for the patients and also for the officers, nurses, staff and employees in every Public Hospital to secure:—

(1) Proper nutrition of the patients and others under the direction of the medical staff and dietitian. Nutrition.

(2) Careful and economical purchasing and storing. Economy.

(3) Appetizing and skilful preparation and cooking with perfect cleanliness and proper serving. Preparation.

(4) The avoidance, as far as possible, of monotonous or routine arrangement of the daily menu. Domestic Science must be regarded hereafter as a necessary part of a nurse's practical training, and to that end each Hospital of 40 beds or more must have a regularly qualified dietitian. Variety.

SOCIAL SERVICE.

Clothing
and shelter.

39. It shall be the duty of the Hospital, through its Social Service Department or otherwise, as the Superintendent may direct, to see that patients discharged from the Hospital are properly clothed, and also, especially if they are strangers or foreigners, that they have somewhere to go, unless they are fully recovered and furnished with money or employment.

FURNISHING AND EQUIPMENT.

Furnishing
and equip-
ment.

40. Wards, operating-rooms, kitchens and all other rooms shall be furnished and equipped in a simple but suitable and adequate manner.

ADDITIONAL REGULATIONS FOR PRIVATE HOSPITALS.

41. A Private Hospital shall be deemed to be a house in which two or more patients are received and lodged at the same time.

Section 27 of *The Hospitals and Charitable Institutions Act* provides as follows:—

License.

“No house shall be used as a Private Hospital except under the authority of a license issued by the Provincial Secretary under the Act.

Penalty.

“If any house is used as a Private Hospital in breach of this section the

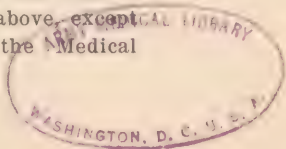
occupier and all persons concerned in the management of the Hospital shall severally incur a penalty not exceeding twenty-five dollars (\$25.00) for every day during which such use is continued."

42. Every house used as a Private Hospital shall be reasonably clean, well ventilated, comfortable, and suitably furnished, and otherwise properly managed and conducted, and no room or apartment of the same shall be allowed to be untidy or unsanitary or neglected or lacking in cleanliness in any way. Condition of house.

43. Every patient in a Private Hospital shall have a separate bed for his or her own use, and every infant or child in a Private Hospital shall have a separate bed or cot for his or her own use. Bed.

44. No person or persons in any Private Hospital shall give to any infant, child or other patient any medicine or drug or any alcoholic liquor without the order of a legally qualified physician. Drugs.

Every infant under nine months of age in a Private Maternity Hospital shall be nursed by his or her mother and as in Regulation 37 above, except that the signature of the Medical Feeding of infants.



Officer of Health of the Municipality or his Deputy shall be required instead of the signature of the Hospital Superintendent. No person or persons shall take away or cause to be taken away a newborn or young infant from his or her mother, thus interfering with the child's right to life and health.

Returns.

45. Accuracy and exactness in all returns is required. Any inattention to this matter is illegal and subject to serious penalties. This applies to any failure or omission to enter immediately the name of any patient admitted or of any operation whatever performed.

Penalties.

Section 38 of *The Hospitals and Charitable Institutions Act* is as follows:—

“Every person who knowingly makes in the Register an untrue entry, shall incur a penalty not exceeding \$200.00.

“Every licensee who fails to make or cause to be made any entry in the Register required by this Act to be made therein, shall incur a penalty not exceeding \$50.00.”

ADDITIONAL REGULATIONS FOR HOUSES OF REFUGE, REFUGES, ORPHANAGES, INFANTS' HOMES AND REFUGES FOR WOMEN, INCLUDING MATERNITY HOS- PITALS.

46. For every House of Refuge, ^{Superin-}
Refuge, Orphanage or Infants' Home ^{tendent.}
or other Public Charity there shall at
all times be a Chief Executive Officer,
appointed for Houses of Refuge by
the County Council and in other
Institutions by the Board of Directors,
Board of Management or other proper
authority, who shall be resident on
the premises, and shall be known as
the Superintendent or Matron of such
Refuge, Orphanage or Infants' Home,
and shall be responsible for its general
conduct and management and shall
make written reports thereon to the
proper authorities as directed. The
appointment of such Superintendent
or Matron shall be notified to the
Inspector by the Secretary of the
Institution within seven days of the
date thereof.

47. The Superintendent of every ^{Officers and}
Refuge, House of Refuge, Orphanage, ^{employees.}
Infants' Home or other Public Charity,
shall be assisted by such Assistant
Superintendent, Matron, Housekeeper,
Nurse, Orderly, Attendant, domestic
or other employee or employees as
shall be necessary, proper and suffi-

cient to secure to the inmates, orphans and infants due and proper care and attention as to their personal cleanliness, health, nourishment and reasonable comfort, both by day and night, and shall to this end set apart a suitable ward, room or rooms for the care of such inmates as are less able to care for themselves, under the charge of a nurse or nurses.

PHYSICIANS.

Physician.

48. Every House of Refuge, and also every Refuge, Orphanage or Infants' Home or other Public Charity shall have attached to it a legally qualified Physician or Physicians to have the care of the health of the inmates of such Institution, and such physician shall visit such Institution at least once a week, or oftener if necessary, and shall thoroughly examine and inspect the entire Institution and report in such form as may be required, to the Board of Management of such Institution, the condition of the health of the inmates, orphans, infants or other children, and the existence or non-existence, as the case may be, of any communicable disease among them, and shall also report as to their food, clothing, cleanliness and reasonable comfort, and as to whether they are properly cared for, and in the case of infants, orphans and other children or younger adults

whether they are being kindly and carefully trained and educated, with recommendations.

Such physician shall also report upon the general condition and cleanliness of the building, especially as to baths, sanitary conveniences of any and every kind, dormitories, refectories, sitting-rooms and other rooms, plumbing appliances and other provisions and accommodation.

DIETARY.

49. Great care and attention shall be Dietary. given to the diet of the inmates, orphans, infants and staff in Houses of Refuge, Refuges, Orphanages, Infants' Homes and all other Public Charities and Maternity Hospitals, so as to secure:

(1) Careful and economical produc- Economy. ing, purchasing, preparation and storing of supplies.

(2) The avoidance, as far as possible Variety. of monotonous or routine arrangement of the daily menu, and the presenting of a suitable variety of diet.

(3) Appetizing and skilful prepara- Preparation. tion and cooking, with perfect cleanliness and good serving, so that the best results may be obtained from the good food provided by the responsible authorities and that none of it may be wasted.

Nutrition.

(4) Proper nutrition of the inmates, having regard to their age and condition. This food for all should be plain, simple, wholesome and nutritious, but the aged require food which is appetizing and easily digested, but not too coarse or heavy. On the other hand, children require an abundance of plain, simple wholesome food and must be taught how to thoroughly and slowly masticate their food, and should also learn how to help themselves and others at the table properly and courteously. Everyone needs a drink of water between meals once or twice a day.

The aged.

Children.

(5) That children from nine months to two or three years of age should begin to learn the proper way to eat, beginning with a crust of bread when they have six or more teeth and gradually having their diet list added to, not being kept on soft food too long, as this is a serious disadvantage.

Feeding of infants.

(6) Every infant must be nursed by the mother till such infant is about nine months of age, unless the Medical Officer of Health of the Municipality or his Deputy and the Physician in charge of the Institution gives an order in writing to the contrary, with reasons, in a book kept specially for the purpose. Under special circumstances, to be recorded in the same

book and with an order in writing signed as above, an infant may be weaned at six months of age. Great attention should be paid to the increase of weight, or otherwise, in infants under one year and a record of this should be kept unless the baby is evidently thriving. Infants must be nursed and fed at regular hours according to a schedule. In exceptional cases, where an infant cannot be nursed by the mother the feeding of such infant must be under the direction of a physician, and the rules of surgical cleanliness must be observed in the care of feeding-bottle and nipple, and in the care and preparation of the milk, and the infant must be held in the arms of the mother or nurse during the feeding, which should take about fifteen or twenty minutes, in order that the feeding should be successful.

50. Houses of Refuge, Refuges, Orphanages, Infants' Homes and other Public Charities should have a country location, and should, especially in the case of Homes for Children, adopt as far as possible the cottage system of construction for new buildings. These cottages should be simple and comfortable but inexpensive in construction and furnishing. The number of inmates in each cottage should be about forty and should not in any case

Site and construction.

exceed sixty, and every effort should be made to foster the home spirit and family ideals by placing in charge of each cottage a house mother or Matron, and by developing a good and kind character and spirit among the inmates, towards each other, and towards the Institution. In the case of boys one of the men appointed on the staff should also reside in each cottage and have general charge of the discipline. The mending, general housework, reading, recreation and sleeping for the inmates of each cottage should be provided for in the several rooms arranged for the purpose in each cottage, and suitable rooms should also be provided therein for the resident officers of the cottage and their assistants, if any.

Farm and garden.

51. Public Charities should in every case be placed, if possible, within grounds providing cultivable land for kitchen gardens, flower gardens, fruit orchards, lawns and farm work, having regard to the profitable outdoor occupation and training, and the best interests of the inmates and to due economy in regard to food supplies and other matters, the inmates contributing as far as possible to their own support.

One acre per inmate for Refuges.

52. Houses of Refuge, etc., should be amply provided for by an amount of land equal to one acre per inmate.

53. The Cottage (two-storey) system, Cottage system. with central kitchen and dining-rooms, separate heating plant, laundry, and storehouses with refrigerator accommodation has been found most suitable for Charitable Institutions where classification of inmates is desirable. In such Institutions there should be an administration building, where the offices, school-rooms and chapel or hall and other rooms for general use should be placed.

ADDITIONAL REGULATIONS FOR COUNTY HOUSES OF REFUGE AND OTHER REFUGES.

54. Houses of Refuge and other Occupation. Refuges require grounds and many of the inmates can be usefully employed at outdoor occupations. The ideal House of Refuge. House of Refuge is a comfortable Home, in which each inmate does all that he or she can according to age and ability to promote the general happiness, comfort and thrift and contributes something to the proper working, care and maintenance of the House as being his or her own house. These Homes are not to be regarded in any sense as Poor Houses, which are believed to be opposed to the genius of the Canadian people. They are County Houses, or City Houses, provided by the community until our present social system shall have developed and improved far enough

Infirmary. to render such Homes and Refuges unnecessary. In every such Public Charity there shall be provided a quiet and comfortable ward or infirmary for men, and a similar ward or infirmary for women, in which inmates who may at any time be ill or infirm may be cared for, and each Refuge must have a competent nurse to care for the sick and carry out the directions of the matron. The coroner must be notified immediately of any death occurring in the House of Refuge.

Occupation. 55. It shall be the duty of the Superintendent to provide, as far as possible, suitable work and occupation, both outdoor and indoor, for every inmate able to work, the younger and stronger inmates caring for the older and more helpless, as well as doing in a thorough and systematic manner all the general housework, but not so as to overwork any one.

Outdoor instruction and recreation.

56. Every Institution having the care of inmates from 15 to 55 years of age shall provide for each such person at least three hours per day of physical work, exercise and recreation, and industrial training, and education, such as gardening, farming, poultry raising, beekeeping, dress-making, mending, sewing, cooking and general housework.

57. The By-laws of every House of Committal.

Refuge must provide for committing and detaining therein indigent persons; and a warrant of committal to a House of Refuge shall be sufficient authority for the Superintendent to receive and detain the person mentioned until he or she is discharged by a similar order, or by order of one of the Inspectors of Prisons and Public Charities. No indigent person shall be refused admission on account of a break of less than two years in his residence in such County. No child shall be an inmate of a House of Refuge nor reside as an inmate in any Institution where adults are cared for.

No children
in Refuges
for adults.

58. A careful and detailed account Restraint.

must be kept in a book provided for the purpose, of any punishment or restraint ordered by the Superintendent for any of the inmates, with exact dates and reasons therefor.

59. Due and proper measures must Supervision.

be taken to secure separate accommodation and occupation for men and women in Houses of Refuge. Supervision should be constant and effective. Communication should not be allowed. Married couples should have rooms provided in a separate part of the House. Special attention should be given to inmates who are feeble-

mind ed or unable, for any reason, to take proper care of themselves.

Tuberculous inmates.

60. If any inmate of a House of Refuge is found to be suffering from tuberculous disease, such inmate must be isolated and due precautions taken for his or her care under the direction of the Physician to the House of Refuge, and he or she must be removed to a Sanitarium for Consumptives as soon as possible.

Furnishing.

61. Houses of Refuge must be adequately and comfortably furnished.

Clothing and general care.

62. The clothing and personal hygiene of all inmates in the House of Refuge shall at all times be under the special care and supervision of the Superintendent and Staff of the House, and they shall endeavor to provide in the best manner possible, according to their judgment, for suitable and adequate clothing and for preserving the self respect of the inmates. The hair of the women should be well cared for and not cut short unless by special request and necessity, and the personal hygiene and comfort of both men and women should be considered and promoted in every way.

Religious and social duties.

63. Religious services, recreation, and social enjoyments as far as possible should be arranged for and favored by the Superintendent and

Staff, and grace should always be said before meals, either by one of the officers or one of the oldest inmates.

ADDITIONAL REGULATIONS FOR REFUGES
FOR WOMEN, OR MATERNITY HOSPITALS
WHERE MOTHERS AND INFANTS ARE
CARED FOR.

64. Refuges, Private Hospitals or ^{Family} other places where needy or deserted ^{building.} mothers, married or unmarried, are cared for, should be in close touch with the outside world both as regards receiving and placing out inmates. Whenever a new inmate is received, the Superintendent or field-worker should make a confidential, sympathetic and thorough private study of her social and industrial possibilities and should with the aid of all interested endeavor to make the very most of her character and capacities, and of the help of any one who has befriended or will befriend her or is responsible for her and for her child, especially the father of the child.

65.—(1) Every infant in such ^{Feeding of} Refuge or Maternity Hospital must be ^{infants.} nursed by the mother, and if any mother applies for admission to such Refuge or Private Hospital for herself and her infant under six months of age or if any other person shall make such application on her behalf,

and such mother is not nursing such infant, the case shall forthwith be reported (form A, 1 and 2) by the Superintendent to the Medical Officer of the Municipality, or his deputy, with full particulars, name of mother and child, place where the birth occurred, name of physician and nurse in charge and the reason why the infant was not properly nursed by the mother, and such mother and child shall be admitted to the Refuge or Hospital temporarily only until the Medical Officer of Health of the Municipality after enquiry directs otherwise, and a proper entry (see above) of the name of mother and infant shall at once be made. No person or persons shall take away or cause to be taken away a new born or young infant from his or her mother, thus interfering with the child's right to life and health.

Object.

(2) The object of these Homes must always be to provide care for both the mother and the infant, and the system of taking an infant for a certain sum of money and agreeing that no further questions will be asked is wrong and must be condemned.

Infant
without
mother.

(3) If any person or persons apply to such Refuge for admission for an infant under six months of age and that infant is not accompanied by the

mother, such application shall forthwith be reported to the Medical Officer of Health of the Municipality or to his deputy appointed for such purpose, and it shall be the duty of such officer or his deputy forthwith to see such person or persons and the mother, if living, and to make a confidential enquiry into all the circumstances of the case, including name and address, place of birth, name of attending physician and nurse, and keep a confidential record (Form B, 1, 2) thereof, one copy of which shall be kept on file at the Institution and the other at his office, and such infant shall be admitted temporarily only, until the Medical Officer of Health directs otherwise, and proper entry (see above) of the name of the infant shall at once be made.

FORM A 1

(To be kept in Institution.)

Name of Institution
 Place Date
 p.m. a.m.

To the Medical Officer of Health of

I beg to inform you that:

~~Name of mother~~ (e. i.)
 Name of mother
 Address
 has this day applied for admission
 for herself to this Institution and for
 her infant aged months, who is
 not being nursed by her.

Name of infant
 Place of birth
 Date of birth
 Name of doctor in charge
 Name of nurse in charge
 Reason for not nursing infant

REPORT OF THE MEDICAL OFFICER
OF HEALTH.

FORM A 2

(To be sent to the Medical Officer
of Health.)

Name of Institution

PlaceDate

..... p.m. a.m.

To the Medical Officer of Health of

.....

I beg to inform you that:

Name of mother

Address

has this day applied for admission
for herself to this Institution and for
her infant aged months, who is
not being nursed by her.

Name of infant

Place of birth

Date of birth

Name of doctor in charge

Name of nurse in charge

Reason for not nursing infant

REPORT OF MEDICAL OFFICER OF
HEALTH.

FORM B 1

(To be kept in Institution.)

Name of Institution

Place Date

..... p.m. a.m.

To the Medical Officer of Health of
.....

I beg to inform you that:

Name of person

Address

has this day applied for admission to
this Institution for an infant aged
months, who is not being nursed by
his or her mother.

Name of infant

Place of birth

Date of birth

Name of doctor in charge

Name of nurse in charge

Reason for not being nursed by the
mother

Name of the mother

Address of the mother

REPORT OF MEDICAL OFFICER OF
HEALTH.

FORM B 2

(To be sent to the Medical Officer of
Health.)

Name of Institution

Place Date

..... p.m. a.m.

To the Medical Officer of Health of
.....

I beg to inform you that:

Name of person

Address

has this day applied for admission to
this Institution for an infant aged
months, who is not being nursed by
his or her mother.

Name of infant

Place of birth

Date of birth

Name of doctor in charge

Name of nurse in charge

Reason for not being nursed by the
mother

Name of the mother

Address of the mother

REPORT OF THE MEDICAL OFFICER
OF HEALTH.

Occupation
and instruc-
tion.

66. Every effort should be made by the management of such Refuge to establish and maintain for the benefit of the Institution and of the inmates various household and other industries and occupations so that the inmates may learn and improve as much as possible during their stay and may be better able to maintain themselves both during their residence and after their discharge. It is also right and desirable that any inmates whose instruction in reading, writing, arithmetic has been neglected, may learn these during their stay by the aid of voluntary helpers, other inmates or members of the staff.

Making and
finding homes.

67. The ideal result of the work done in connection with such a Refuge would be to fit each of the mothers, with the aid of the father of the child, to make a home, and this can often be done by the efforts of the field-worker and the aid of all those interested in the Institution and in social welfare. Where this is impossible, or undesirable on account of the character of the mother or father or both, and the child is healthy and suitable for adoption, the next best thing is to find a home for the child if possible before such child is one year of age, under the authority of

the Act for the Protection of Neglected and Dependent Children and the Children's Aid Society. The best Institution is a poor substitute for a good home. Institutionalized children do not make good citizens, and the right policy is to find a home for every child where such child will be a member of the family. Careful and frequent visiting of such homes must be done by the field-worker and the Children's Aid Society.

ADDITIONAL REGULATIONS FOR ORPHANAGES.

68. Every Public Charity where children or infants are received as inmates shall provide and set aside one or more suitable wards or rooms, properly equipped and furnished, to be known as an Admitting Department or Observation Ward, and every Superintendent or other Officer, upon receiving a new inmate for admission to such Institution shall, before admitting him or her to contact with the other inmates, cause him or her to be placed in such Admitting Department, until he or she has been seen and examined by the Physician on duty and certified in writing by such Physician to be free from any communicable disease and a proper inmate to be received into such Institution. Such certificate in writing shall include a statement as to the

report of a bacteriological culture taken from the throat of such new inmate.

**Personal
care and
conduct.**

69. It shall be the duty of the Superintendent and staff of every Hospital, Orphanage, Infants' Home or other Institution where children are cared for, to take daily and constant care of all matters of clothing, cleanliness and personal hygiene and conduct, and great regard should be paid to organizing these matters.

**Care of
infants.**

(1) Infants under one year of age should be bathed daily in warm water with every attention to their comfort and the proper condition and cleanliness of the skin, especially at the flexures of the body. They should be clothed in simple, soft, inexpensive garments not applied too tightly, and the clothing should be changed frequently, and constant care must be given to keeping them clean and dry, and to their regular feeding and care according to a schedule which should be hung up in the ward or nursery. Infants under six months of age, and older infants if not thriving, should be weighed weekly and a simple record of this should be kept in the ward or nursery. Everything done for an infant should be done gently.

**Care of
children.**

(2) Children from one to three years of age should be bathed daily

or as often as possible, and in no case less frequently than two or three times a week, and clothing should be changed frequently. The test of proper attention to these matters is the sweet and clean odour of the ward or nursery of the children, and this must be secured because anything else means neglect.

(3) The bathing and clothing of children over three or four years of age also requires great attention and must be carefully supervised and organized, so as to secure satisfactory results. Older children.

(4) The personal hygiene of children in Institutions is a matter that requires great care, work and watchfulness, and means much to the Institution. Every effort should be made to train the children at as early an age as possible to assist in dressing and taking care of themselves and others and of their clothes and possessions. Great attention should be paid to preserving and increasing their natural advantages and attractions. The hair of boys should be cut short, but not the hair of the girls. The condition of the skin, hair, teeth, eyes, ears and nose as well as hands and feet should be carefully examined daily by the nurses and attendants, and anything amiss Personal hygiene and appearance.

should be reported promptly to the Superintendent or Head Nurse for attention and quarantine if necessary.

Clothing. (5) Clothing should be comfortable, simple and inexpensive and as tasteful as possible.

Habits. (6) Good habits must be formed and strengthened and bad habits must be prevented or eradicated.

Organization. 70. Proper organization of children's homes and Institutions is expected and due separation of the older boys and girls.

Religious education. 71. Every care and attention is to be given to the religious up-bringing and education of children, and family prayers, the saying of grace and of their own prayers are to be observed in such a way as to make them as easily understood and enjoyed by the children as possible. Every opportunity is to be given to the clergy and others of the different Churches to which the children may belong to visit and instruct and assist them.

Play. 72. In all Institutions for children every effort should be made to encourage play for enjoyment and for its educational and disciplinary value and the opportunity it gives to develop character and ability and leadership.

Playgrounds and playrooms and simple and wholesome recreation in the open air are a great boon and a great necessity in the upbringing of children and future citizens. Play should always be properly supervised by the members of the staff.

73. (1) In any Children's Home, Orphanage, Refuge, Infants' Home, or other Institution where children are cared for it shall be the object of the Management and staff, except in the case of the Feeble-minded children, and such as are for any reason unfit to be members of a family circle, to prepare all to take their places in their own homes if there is any chance of that home being properly re-established or if not, to find a home for each one. Education, training, in home duties, simple industrial occupations, the care of their own persons and clothes are to be in every way promoted, encouraged and constantly and thoroughly attended to and the stay of children in Institutions should be, if possible, limited to one year at the most. Normal children over twelve years of age should not be in any Institution. Preparation for active life.

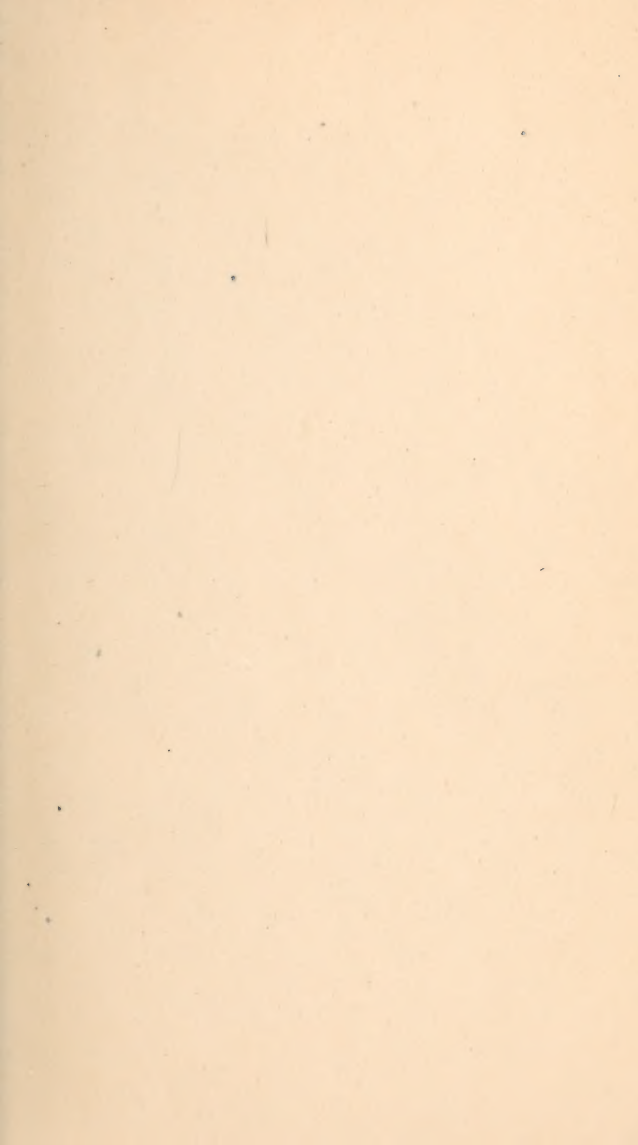
(2) Every effort should be made to encourage initiative, to develop character, and usefulness, to avoid the institutionalizing of children and to

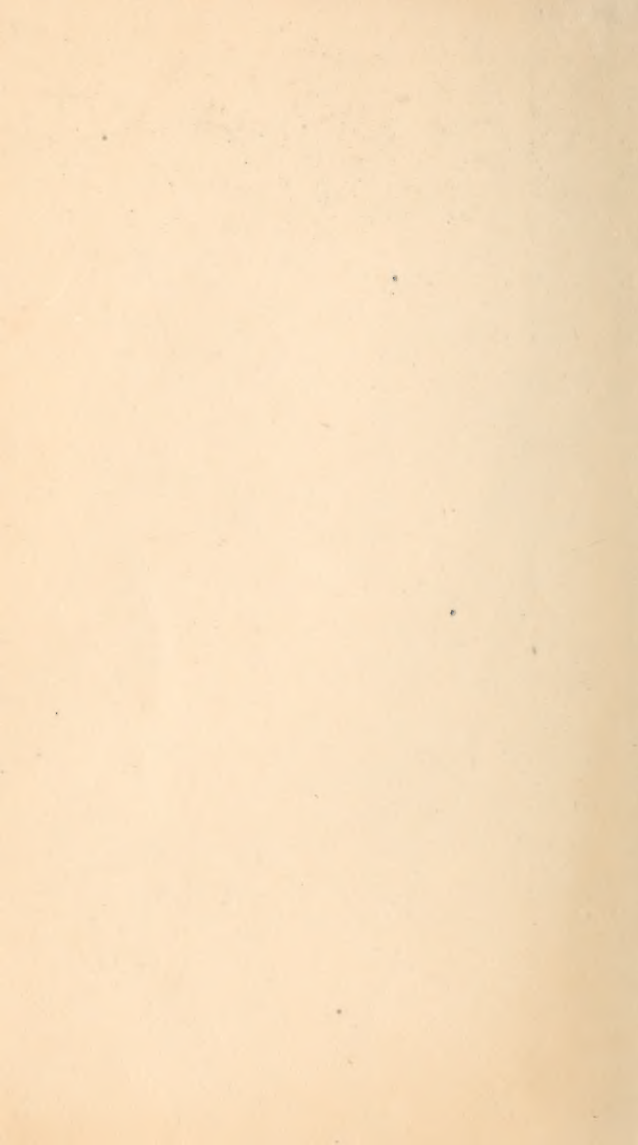
prepare them to be good citizens. The Institution should be kept in touch with the outside world by every good means, and the assistance of a Field Worker and of the Children's Aid Society should be made available as far as possible.

THE FEEBLE-MINDED.

The feeble-minded.

(3) In the case of feeble-minded and other mentally defective children, who are unable to care for themselves or take their places in the world, every reasonable and kindly effort should be made to train and educate all their powers and faculties, so that they may take their places in a training school or Institution as useful and happy inmates who are able to contribute to their own maintenance according to their ability. They can in almost every case be taught habits of cleanliness, the care of their persons and clothes, household work, and simple industrial and agricultural occupations, and many of them can help to take care of other inmates.





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